

VIRGINIA DEPARTMENT OF HEALTH

DIVISION OF VITAL RECORDS

**ELECTRONIC DEATH REGISTRATION SYSTEM (EDRS) USER
MANUAL FOR
OFFICE OF DECEDENT AFFAIRS**

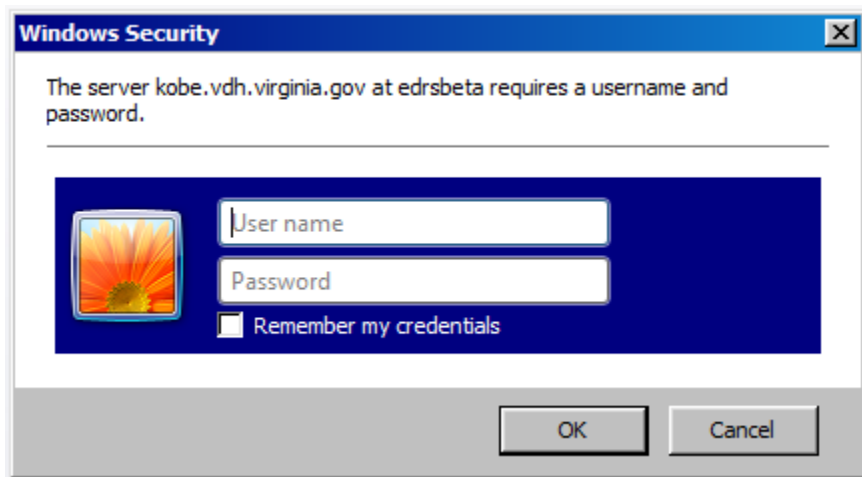
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1. GETTING INTO THE EDRS

STEP 1.

Once you have launched the EDRS using the URL provided to you, you will see a pop-up box to enter your user name and password to log in to the application. (See illustration below)



A Windows Security dialog box titled "Windows Security" with a close button (X) in the top right corner. The text inside reads: "The server kobe.vdh.virginia.gov at edrsbeta requires a username and password." Below this text is a blue rectangular area containing a login form. The form has a small icon of a sun on the left, followed by two text input fields: "User name" and "Password". Below the "Password" field is a checkbox labeled "Remember my credentials". At the bottom of the dialog box are two buttons: "OK" and "Cancel".

Enter your username and password and click OK.

STEP 2.

You may view your messages in the inbox displayed on the resulting screen. Click on Continue to navigate to the next screen. In order to delete the messages from your inbox, simply check the box next to the message that you wish to delete and click on Continue.



Virginia Vital Events And Screening Tracking System

New Messages

Please check the box to acknowledge each message and click Continue button to continue to the application

	From	Subject	Date Received
<input type="checkbox"/>	Stmary_Ph_1, Stmary_Ph_1 (BON SECOURS ST. MARY'S HOSPITAL)	Case No. 431 has been accepted by BON SECOURS ST. MARY'S HOSPITAL	07/10/2014
	Case No. 431 for CARL GALLUP has been accepted by BON SECOURS ST. MARY'S HOSPITAL. Please view your active cases list to monitor the most recent status of this case.		
<input type="checkbox"/>	Stmary_Ph_1, Stmary_Ph_1 (BON SECOURS ST. MARY'S HOSPITAL)	Medical Certification completed for Case No. 431	07/10/2014
	Dr.STMARY_PH_1, STMARY_PH_1 has certified the Case No. 431 for CARL GALLUP.		
<input type="checkbox"/>	Diman, Krystina (MORRISSETT FUNERAL HOME AND CREMATION SERVICE)	Out of State Transit Permit approval Requested for Case No. 95	07/10/2014
	MORRISSETT FUNERAL HOME AND CREMATION SERVICE has submitted an Out of State Transit Permit for your approval for Case No. 95 for CHRISTY COLES. The permit is now available for your review.		
<input type="checkbox"/>	Totman, Jane (METROPOLITAN FUNERAL SERVICE INC.)	Out of State Transit Permit approval Requested for Case No. 327	07/10/2014
	METROPOLITAN FUNERAL SERVICE INC. has submitted an Out of State Transit Permit for your approval for Case No. 327 for KHAL DROGO. The permit is now available for your review.		
<input type="checkbox"/>	Vr_User_1, Vr_User_1 (VITAL RECORDS)	State File Number assigned for Case No. 431	07/10/2014
	A State File Number has been assigned to Case No. 431 for CARL GALLUP by the Division of Vital Records		
<input type="checkbox"/>	Baker, Tyra (CHINN FUNERAL SERVICE)	Out of State Transit Permit approval Requested for Case No. 440	07/10/2014
	CHINN FUNERAL SERVICE has submitted an Out of State Transit Permit for your approval for Case No. 440 for SAMUEL BELL. The permit is now available for your review.		





[HELP](#)


EBLHML

STEP 3.


The next screen is the Virginia Vital Events and Screenings Tracking System Screen Menu with all the modules. Based on your role, you will only have access to the EDRS. Click on the EDRS module to continue.




Virginia Vital Events And Screening Tracking System




Birth Certificate Reporting




Certifiable




Correspondence Tracking System




Virginia Infant Screening and Infant Tracking System



Electronic Death Registration System



Maintenance



[Messages\(6New\)](#)[Password Reset](#)[Application Assistant](#)[Logout](#)


If you need VDH application support, please send your request via email to aim_webappshelp@vdh.virginia.gov or call us at 804-864-7200 and select option 2, FAX - 804-864-7155.

Warning: This system is for official Virginia Department of Health use and may only be accessed by users that are currently authorized by the Division of Vital Records and Division of Child and Adolescent Health. Unauthorized use, access or modification of this system or any data stored within is a criminally prosecutable offense. Any attempts at unauthorized access or data editing are logged and strictly prohibited. All usage of this system is monitored and audited, and, by accessing this system, all users consent to these activities.

[HELP](#)

FRXVII

The resulting screen is the **EDRS Home screen**.



Electronic Death Registration System

User: Staff Da_Group(DA_STAFF)
Facility: Xyz Greater Richmond Hospital

Death Registration Menu

- Create Case
- Active Cases
- Completed Cases
- Fetal Death Assignments
- Release Decedent
- Reports/Extracts
- User Preferences
- Message Center(2)
- EDRS Menu
- VVESTS Menu
- Logout

Recent Active Cases-(HOSP_DA, HOSP_OFFICE)

Case ID	Case Type	Decedent Name [First,Middle,Last]	Gender	DOB	DOD	Current Owner	Status
4884	Green Border	RITA, CHENG	FEMALE	01/01/2010	01/01/2014	PHYS_MC (BON SECOURS ST. MARY'S HOSPITAL)	Medical Certification In-progress
4583	RB - OCME	SSSSS, SSS, AASAS	MALE		02/01/2014	XYZ GREATER RICHMOND HOSPITAL	Dropped to Paper
4448	Green Border	ASDASD, ASDASD, ASDSAD	MALE			XYZ GREATER RICHMOND HOSPITAL	Case Creation
4447	Green Border	SDCFDSF, SDFDF, ASDSAD	MALE			XYZ GREATER RICHMOND HOSPITAL	Case Creation
4446	Green Border	JENNY, RANDALL	FEMALE	02/15/1980	04/05/2014	OCME - CENTRAL DISTRICT	Medical Certification Requested
4445	Green Border	POOL1, POOL1	MALE		01/01/2014	MED_DOC2 (XYZ GREATER RICHMOND HOSPITAL)	Medical Information Certified
4444	Green Border	DOC2, DOC2, DOC2	MALE		05/01/2013	MED_DOC1 (XYZ GREATER RICHMOND HOSPITAL)	Medical Information Certified
4443	Green Border	DOC1, DOC1, DOC1	NOT DETERMINE			MED_DOC1 (XYZ GREATER RICHMOND HOSPITAL)	Medical Certification In-progress
4423	Green Border	ASDASD, ASDSAD	MALE			XYZ GREATER RICHMOND HOSPITAL	Medical Certification In-progress
4286	Green Border	LEENA, JOSE	FEMALE		02/10/2014	MED_DOC2 (XYZ GREATER RICHMOND HOSPITAL)	Medical Certification In-progress

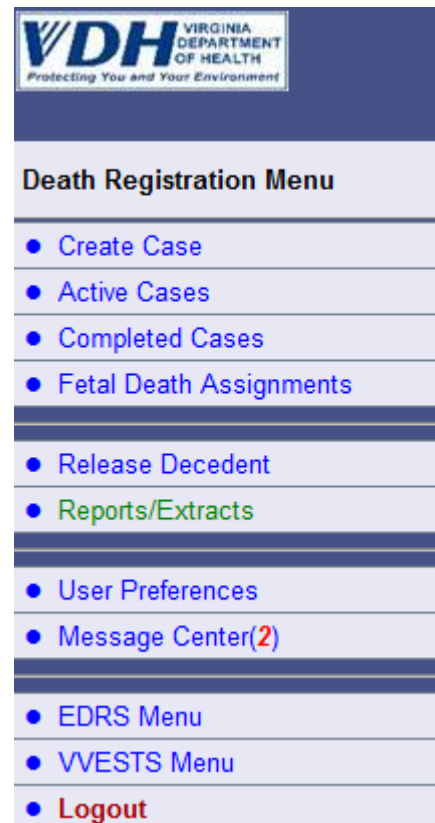
1 - 10 of 31 Click Active Cases for Complete list

EDVHOM

2. THE BASICS

2.1. THE NAVIGATION BAR -

To the left of the screen is the Navigation Bar which houses various links allowing you to move around in the system. This Navigation Bar is very dynamic in nature and will change from user to user based on what roles a user has.



2.2. SETTING USER PREFERENCES –

Click on the user preferences link in the navigation bar. On the resulting screen, you may enter up to three e-mail addresses to receive notifications pertaining to cases in your facility. You may also choose the type of notifications you wish to receive.

A screenshot of the 'User Preferences' screen within the 'Electronic Death Registration System'. The top header bar includes the VDH logo, the system title 'Electronic Death Registration System', and user information: 'User: Staff Da_Group(DA_STAFF)' and 'Facility: Xyz Greater Richmond Hospital'. On the left is a 'Death Registration Menu' sidebar with links like 'Create Case', 'Active Cases', 'Completed Cases', 'Fetal Death Assignments', 'Release Decedent', 'Reports/Extracts', 'User Preferences' (highlighted), 'Message Center(2)', 'EDRS Menu', 'VVESTS Menu', and 'Logout'. The main content area is titled 'User Preferences' and contains a message: 'This system is designed to help you keep informed of any changes related to death certificate cases you are involved by sending E-mail notifications'. Below this is a section for entering email addresses: 'If you would like to be notified of status changes related to your cases, please enter E-mail address(es)'. It includes three input fields labeled 'Primary E-mail Address:', 'Second E-mail Address:', and 'Third E-mail Address:'. A red arrow points to these fields with the text 'UPTO THREE EMAIL ADDRESSES'. Below the email fields is a list of notification types, each with a checkbox: 'When an assignee has accepted the case', 'When an assignee has rejected the case', 'When the Funeral Director has signed the demographics information', 'When the Medical Certifier has signed the Medical Information', 'WHEN THE CASE HAS BEEN FILED WITH DVR', 'When the case has been assigned a State File Number', and 'When the Office of the Chief Medical Examiner has rejected a case referred to them by you'. A red arrow points to this list with the text 'TYPES OF NOTIFICATIONS'. At the bottom left of the notification list is a 'Save' button. At the bottom right is a blue link labeled 'EDIUEN'.

3. HOW TO CREATE A CASE?

3.1. BEGIN CREATION

- A Natural Death or Non-ME (green border) case may be created by the Office of Decedent Affairs. To begin creating a case, click on the “Create Case” link in the left navigation bar.

The screenshot shows the 'Electronic Death Registration System' interface. On the left is a 'Death Registration Menu' with links: Create Case, Active Cases, Completed Cases, Fetal Death Assignments, Release Decedent, Reports/Extracts, User Preferences, Message Center(2), EDRS Menu, VVESTS Menu, and Logout. A red arrow points to the 'Create Case' link with the text 'CLICK HERE'. The main area displays 'Recent Active Cases-(HOSP_DA, HOSP_OFFICE)' as a table with columns: Case ID, Case Type, Decedent Name [First,Middle,Last], Gender, DOB, DOD, Current Owner, and Status. The table lists several cases, including Rita, Cheng; SSSSS, SSS, AASAS; ASDASD, ASDASD, ASDSAD; SDCFDSF, SDFDF, ASDSAD; JENNY, RANDALL; POOL1, POOL1; DOC2, DOC2, DOC2; DOC1, DOC1, DOC1; ASDASD, ASDASD; and LEENA, JOSE. At the bottom right, it says '1 -10 of 31 Click Active Cases for Complete list' and 'EDVHOM'.

- All case creations must begin with a search for the decedent in the system. In order to search, enter all information known about the decedent. Click on Query.

The screenshot shows the 'Electronic Death Registration System' interface with the 'Decedent Search - New Case' form. The form includes fields for: First Name (JOHN), Last Name (GRISHAM), Middle Name, Maiden Name, Date of Birth (03/19/1981), Date of Death (08/24/2014), Social Security Number, and County of Death. A checkbox for 'Was the decedent born in Virginia?' is set to 'NO'. The 'Query' button is highlighted with a red circle. The left navigation menu is visible on the left side. At the bottom right, it says 'EDQSN'.

- If no case was found matching your search criteria, click on the New Case button at the bottom of the page.

Electronic Death Registration System

User: Staff Da_Group(DA_STAFF)
 Facility: Xyz Greater Richmond Hospital

Death Registration Menu

- Create Case
- Active Cases
- Completed Cases
- Fetal Death Assignments
- Release Decedent
- Reports/Extracts
- User Preferences
- Message Center(2)
- EDRS Menu
- VVESTS Menu
- Logout

Decedent Search Results - New Case

All Decedent Cases - Search Results							
Case ID	Case Type	Decedent Name <small>(First,Middle,Last)</small>	Gender	DOB	DOD	Current Owner	Status
Your search criteria: New Case							

CLICK HERE

[EDLSNC](#)

3.2. DECEDENT DEMOGRAPHICS

3.2.1. DECEDENT INFORMATION

- The decedent's demographic information is the responsibility of the Funeral Homes. Enter as much of the decedent's demographic information as you can, at a minimum you must enter the decedent's **First Name, Last Name, Gender, and the Date of Death**. Enter this information and click on the save button at the bottom of the page.

Electronic Death Registration System

User: Staff Da_Group(DA_STAFF)
 Facility: Xyz Greater Richmond Hospital

Death Registration Menu

- ▲ Demographics
 - Decedent Information
 - Decedent Residence
 - Decedent Personal Data
 - Decedent Family
 - Informant Data
 - Disposition
 - eSignature
 - Request MC
- ▼ Medical Certification
- Case Validation
- Case Summary
- Case Comments
- Preview Certificate
- Create/Print Forms
- EDRS Menu
- Logout

Decedent Information

First Name: <input type="text" value="JOHN"/>	Middle Name: <input type="text"/>	Last Name: <input type="text" value="GRISHAM"/>	Maiden Name: <input type="text"/>	Suffix: <input type="text"/>
Gender: <input type="text" value="MALE"/>	Date of Birth: <input type="text" value="03/19/1981"/> (mm/dd/yyyy)	Date of Death: <input type="text" value="08/24/2014"/> (mm/dd/yyyy)	Was Decedent ever in Armed Forces?: <input type="text" value="NO"/>	
Also Known As (A. K. A.) <input type="text" value="None"/> Add				
Age at Time of Death Years: <input type="text" value="33"/> OR <input type="text"/> Months/Days OR <input type="text"/> Hours/Minutes			Place of Birth US State of Birth: <input type="text" value="Idaho"/> OR Foreign Country of Birth: <input type="text"/>	
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> OR <input type="radio"/> Available <input checked="" type="radio"/> None <input type="radio"/> Unknown <input type="radio"/> Not Obtainable				
<input type="button" value="Save"/> <input type="button" value="Undo"/>				

INFORMATION ENTERED AS
SEARCH CRITERIA IS
PREPOPULATED

[EDIDEC](#)

- Once the information has been saved, click on the Place of Death link in the left navigation bar.

Death Registration Menu

- ▲ **Demographics**
 - Decedent Information
 - Decedent Residence
 - Decedent Personal Data
 - Decedent Family
 - Informant Data
 - **Place of Death**
 - Disposition
 - eSignature
 - Request MC
- ▼ **Medical Certification**

3.2.2. PLACE OF DEATH. –

- This screen allows you to enter information regarding the decedent's place of death.

Electronic Death Registration System

User: Staff Da_Group(DA_STAFF)
Facility: Xyz Greater Richmond Hospital

Case#: 5005; Decedent: GRISHAM,JOHN

Place of Death

Place of Death: Other (Specify):

Facility Name:

Address of the place of death

Check here if Decedent Home address is same as Decedent's Residence ☐

☐ Complete US Address ☐ Partial US Address

Street Number: Pre-Directional: Street Name: Street Suffix: Post-Directional: Apt #:

Zip Code: City: State: Postal County: County (if other than postal):

[EDIPLD](#)

- Begin by selecting the Place of Death from the dropdown list activated by clicking on the little arrow in the gray box.

Place of Death:

Facility Name:

Address of the place of death:

Check here if Decedent Home: ☐

☐ Complete US Address

Street Number: Pre-Discharge

CLICK HERE

IF DEATH OCCURRED IN A HOSPITAL

DEAD ON ARRIVAL

INPATIENT

EMERGENCY ROOM/OUTPATIENT

IF DEATH NOT OCCURRED IN A HOSPITAL

NURSING HOME

HOSPICE

LONG TERM CARE FACILITY

DECEDENT'S HOME

OTHER (SPECIFY)

CORRECTION FACILITY

Now, click on the “L” at the end of the Facility of Death field. When you see the L (blue ‘L’) you may click on it to reveal a list of values that you can select from to populate that field.

Facility Name:

L

- This will generate a pop-up window with a list of all facilities which match the place of death category you selected in the prior step. (See Illustration below)

Facility LOV - Windows Internet Explorer provided by VA IT Infrastructure Partnership

Search criterion for Facilities:

%

List of Facilities	
Name	Address
1ST MEDICAL GROUP	77 NEALY AVE , LANGLEY AFB, VA 23665
633RD MEDICAL GROUP	77 NEALY AVENUE , HAMPTON, VA 23665
AATESTING HOSP	TSS , RICHMOND, VA 23294
ALLEGHANY REGIONAL HOSPITAL	P.O. BOX 7 , LOW MOOR, VA 24457
AUGUSTA MEDICAL CENTER	96 MEDICAL CENTER DRIVE , FISHERSVILLE, VA 22939
BEDFORD MEMORIAL HOSPITAL	1613 OAKWOOD STREET , BEDFORD, VA 24523
BIRTH CENTER OF BLUE RIDGE INC.	2120 ANGUS ROAD , CHARLOTTESVILLE, VA 22901
BIRTHCARE & WOMENS HEALTH CERTIFIED MID-WIVES	1501 KING STREET , ALEXANDRIA, VA 22314
BON SECOURS ST. FRANCIS MEDICAL CENTER	13700 ST. FRANCIS BOULEVARD , MIDLOTHIAN, VA 23114
BON SECOURS ST. MARY'S HOSPITAL	5801 BREMO ROAD , RICHMOND, VA 23226
BUCHANAN GENERAL HOSPITAL	ROUTE 5 BOX 20 , GRUNDY, VA 24614
CARILION FRANKLIN MEMORIAL HOSPITAL	180 FLOYD AVENUE , ROCKY MOUNT, VA 24151
CARILION NEW RIVER VALLEY MEDICAL CENTER	2900 TYLER ROAD , CHRISTIANSBURG, VA 24073
CARILION RADFORD COMMUNITY HOSPITAL	700 RANDOLPH STREET , RADFORD, VA 24141
CARILION ROANOKE COMMUNITY HOSPITAL	101 ELM AVE. SW , ROANOKE, VA 24029
CARILION ROANOKE MEMORIAL HOSPITAL	1906 BELLEVIEW AVENUE , ROANOKE, VA 24011
CARILION STONEWALL JACKSON HOSPITAL	1 HEALTH CIRCLE , LEXINGTON, VA 24450
CARILLON GILES MEMORIAL	1 TAYLOR AVENUE , PEARISBURG, VA 24134
CATAWBA HOSPITAL	5525 CATAWBA HOSPITAL DR , CATAWBA, VA 24070
CENTRAL STATE HOSPITAL	26317 WEST WASHINGTON STREET , PETERSBURG, VA 23803
CHESAPEAKE GENERAL HOSPITAL	736 BATTLEFIELD BLVD. NORTH , RICHMOND, VA 23225
CHESTERFIELD MEDICAL CENTER	1116 CHESTERFIELD AVE , CHESTERFIELD, VA 23832
CHILDRENS HOSPITAL OF KINGS DAUGHTERS	800 OLNEY ROAD , NORFOLK, VA 23507
CJW MEDICAL CENTER - JAHNKE ROAD	7101 JAHNKE ROAD , RICHMOND, VA 23225
CJW MEDICAL CENTER - JOHNSTON-WILLIS DRIVE	1401 JOHNSTON-WILLIS DRIVE , RICHMOND, VA 23235
CLINCH VALLEY MEDICAL CENTER	2949 WEST FRONT STREET , RICHLANDS, VA 24641
COLUMBIA RETREAT HOSPITAL	2621 GROVE AVENUE , RICHMOND, VA 23220
COMMONWEALTH CENTER FOR CHILDREN & ADOLESCENTS	1355 RICHMOND RD , STAUNTON, VA 24402
COMMUNITY MEMORIAL HEALTHCENTER	125 BUENA VISTA CIRCLE , SOUTH HILL, VA 23970

- Click a facility name to select the desired facility.
- Wild card search - To perform a wild card search, enter the first few letters of the desired facility name before the % sign in the "FIND" text box and click on find. For example – searching by BO% will return the following results.

Facility LOV - Windows Internet Explorer provided by VA IT Infrastructure Partnership

Search criterion for Facilities:

BO%

List of Facilities	
Name	Address
BON SECOURS ST. FRANCIS MEDICAL CENTER	13700 ST. FRANCIS BOULEVARD , MIDLOTHIAN, VA 23114
BON SECOURS ST. MARY'S HOSPITAL	5801 BREMO ROAD , RICHMOND, VA 23226

- Once you have selected the desired facility, the corresponding address of the selected facility will be pre-populated in the address fields and these fields will be disabled for editing (*denoted by grey text*).

Address of the place of death

Check here if Decedent Home address is same as Decedent's Residence ☐

☒ Complete US Address ☐ Partial US Address

Street Number: Pre-Directional: Street Name: 13700 ST. FRANCIS BOULEVARD Street Suffix: Post-Directional: Apt #:

Zip Code: 23114 City: MIDLOTHIAN State: Virginia Postal County: CHESTERFIELD COUNTY County (if other than postal):

Save Undo Next

Text is grayed out.

- Click on the Save button at the bottom of the screen. Once saved, navigate to the next screen by clicking on NEXT at the bottom of the page or by using the link in the left navigation bar.

Death Registration Menu	Place of Death
▼ Demographics	<p>Changes are saved successfully</p> <p>Place of Death: <input type="text"/></p> <p>Facility Name: <input type="text"/></p> <p>Address of the place of death</p> <p>Check here if Decedent Home address is same as Decedent's Residence <input type="checkbox"/></p> <p><input checked="" type="radio"/> Complete US Address <input type="radio"/> Partial US Address</p> <p>Street Number: <input type="text"/> Pre-Directional: <input type="text"/></p> <p>Zip Code: 23114</p> <p>Save Undo Next</p>
▲ Medical Certification	
● Place of Death	
● Determination of Death	
● Cause of Death	
● Other Factors	
● Certification	
● Assign to Funeral Home	
● Case Validation	
● Case Summary	
● Case Comments	
● Case Events	
● Preview Certificate	
● Create/Print Forms	
● EDRS Menu	
● Logout	

CLICK HERE TO NAVIGATE TO THE NEXT SCREEN

3.3. MEDICAL INFORMATION

The medical information may be entered by a user of the Decedent Affairs group or by a Physicians' staff member. The medical information may also be entered by the physician during the completion of the medical certification.

3.3.1. DETERMINATION OF DEATH

Enter all information in the Determination of Death Screen. This screen will allow you to enter the date and time of death, as well as, choose whether the date and time of death were - **actual, approximate, presumed, or found on.** (See illustrations below)

Determination of Death		Case#: 454; Decedent: GRISHAM,JOHN	
Date of Death: 05/05/2014 (mm/dd/yyyy)	Date of Death Modifier: [Dropdown]	Time of Death: 12:00 AM	Time of Death Modifier: [Dropdown]
Was Medical Examiner Contacted?: [Dropdown]	[Dropdown] Actual Date Of Death Approximate Date of Death Presumed Date of Death Date Found On		
[Save] [Undo] [Previous] [Next]			

[EDUDED](#)

Determination of Death		Case#: 454; Decedent: GRISHAM,JOHN	
Date of Death: 05/05/2014 (mm/dd/yyyy)	Date of Death Modifier: [Dropdown]	Time of Death: 12:00 AM	Time of Death Modifier: [Dropdown] Actual Time Of Death Approximate Time of Death Presumed Time of Death Time Found On Unknown Time of Death
Was Medical Examiner Contacted?: [Dropdown]	[Dropdown]		
[Save] [Undo] [Previous] [Next]			

[EDUDED](#)

Save the information and navigate to the next screen. This will take you to the CAUSE OF DEATH screen.

3.3.2. CAUSE OF DEATH

Below is an illustration of the Cause of Death screen.

Cause of Death
Case#: 454; Decedent: GRISHAM,JOHN

[NCHS Recommendations for entry of Cause of Death](#)
Enter the diseases, injuries or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. Enter only one cause on a line.

☐ Check if Cause of Death has not yet been determined or is PENDING

Cause of Death

Immediate Cause (Final disease or condition resulting in death)

Line(a) Maximum Text Length: 120 Characters Left: 120

Due or as a consequence of

Line(b) Maximum Text Length: 120 Characters Left: 120

Due or as a consequence of

Line(c) Maximum Text Length: 120 Characters Left: 120

Due or as a consequence of

Line(d) Maximum Text Length: 120 Characters Left: 120

Other Significant Conditions

Maximum Text Length: 240 Characters Left: 240

Interval between Onset and Death

Save
Undo
Previous
Next

EDICOD

- For pending cause of death, check the pending checkbox. This will populate all cause of death lines with the word "PENDING" unchecking the checkbox will remove the word PENDING.

☒ Check if Cause of Death has not yet been determined or is PENDING

Cause of Death

Immediate Cause (Final disease or condition resulting in death)

Line(a)

Due or as a consequence of

Line(b)

Due or as a consequence of

Line(c)

Due or as a consequence of

Line(d)

Other Significant Conditions

12

3.3.2.1. VIEWS (CDC) CAUSE OF DEATH VALIDATION

- Misspelling a cause of death (medical term) will give you a warning in sync with the web service provided by the Center for Disease Control (CDC). (See illustration below, *TUBERCULOSIS* has been misspelled as *T.U.B.E.R.C.L.O.S.I.S*)

The Center for Disease Control (CDC) ran a check on the cause of death that you have entered, and recommended some changes. Please point or click your mouse at the text in RED inside or below the Cause of Death fields to learn more.

Changes are saved successfully. !

[NCHS Recommendations for entry of Cause of Death](#)
Enter the diseases, injuries or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. Enter only one cause on a line.

☐ Check if Cause of Death has not yet been determined or is PENDING

Cause of Death		Interval between Onset and Death
Line(a) Immediate Cause (Final disease or condition resulting in death) tuberclosis	Maximum Text Length: 120 Characters Left: 109	
Line(b) Due or as a consequence of	Maximum Text Length: 120 Characters Left: 120	
Line(c) Due or as a consequence of	Maximum Text Length: 120 Characters Left: 120	
Line(d) Due or as a consequence of	Maximum Text Length: 120 Characters Left: 120	
Other Significant Conditions		
Maximum Text Length: 240 Characters Left: 240		

Save Undo Previous Next

- Place your mouse over the misspelled word to get a recommendation from this CDC web service and click on the appropriate recommendation to rectify the mistake.

The Center for Disease Control (CDC) ran a check on the cause of death that you have entered, and recommended some changes. Please point or click your mouse at the text in RED inside or below the Cause of Death fields to learn more.

Changes are saved successfully. !

[NCHS Recommendations for entry of Cause of Death](#)
Enter the diseases, injuries or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. Enter only one cause on a line.

☐ Check if Cause of Death has not yet been determined or is PENDING

Cause of Death		Interval between Onset and Death
Line(a) Immediate Cause (Final disease or condition resulting in death) tuberclosis	Maximum Text Length: 120 Characters Left: 109	
Line(b) Due or as a consequence of	Maximum Text Length: 120 Characters Left: 120	
Line(c) Due or as a consequence of	Maximum Text Length: 120 Characters Left: 120	
Line(d) Due or as a consequence of	Maximum Text Length: 120 Characters Left: 120	
Other Significant Conditions		
Maximum Text Length: 240 Characters Left: 240		

Save Undo Previous Next

3.3.3. OTHER FACTORS

- The next screen would be the Other Factors screen where you may enter the following information about the decedent – Autopsy information, tobacco usage, pregnancy status, external factors to cause of death and manner of death.

Death Registration Menu | Other Factors | Case#: 5005; Decedent: JOHN, GRISHAM

▼ Demographics
▲ Medical Certification
• Determination of Death
• Cause of Death
• Other Factors
• Certification
• Assign to Funeral Home

• Case Validation
• Case Summary
• Case Comments

• Preview Certificate
• Create/Print Forms

• EDRS Menu
• Logout

Was an autopsy performed? [dropdown]
Were autopsy findings available prior to completion of the cause of death? [dropdown]
Did tobacco use contribute to death? [dropdown]
If decedent was FEMALE, enter the pregnancy status [dropdown]
External factor to cause of death [dropdown]
Manner of Death: [dropdown]

Save Undo Previous Next

[EDUOTH](#)

- If an autopsy was not performed, the question relating to autopsy findings will be disabled (denoted by a light gray arrow for the dropdown list).

Was an autopsy performed? NO [dropdown arrow]

Were autopsy findings available prior to completion of the cause of death? [disabled dropdown arrow]

- If the decedent was a male, the pregnancy question will be disabled (denoted by a light gray arrow for the dropdown list).

If decedent was FEMALE, enter the pregnancy status [disabled dropdown arrow]

- One of the following manners of death must be selected.

[dropdown arrow]
Natural Causes
Pending

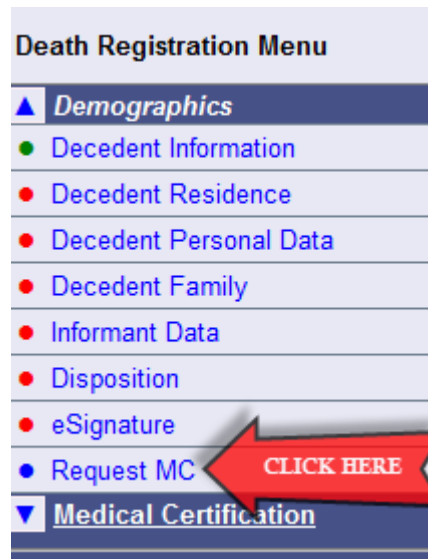
- If you are a user from the Office of the Decedent Affairs creating the case or are creating the case as a Physicians' staff member, the NEXT Button will be disabled. If you are the Physician entering medical information for the case on the OTHER FACTORS screen, the NEXT button will be enabled.

This completes the process of **creating** a case in the System.

4. REQUESTING MEDICAL CERTIFICATION

- Once a user has created a case in the EDRS, you must, as Decedent Affairs User or a Physicians Staff member request Medical Certification from the physician.

- Begin by clicking on the REQUEST MC link in the left navigation bar. You may need to expand the demographics grouping in case you cannot see the REQUEST MC Link.



- The following screen will appear for you to select whether you are transferring the case to a Physicians' pool or to one specific physician.

Medical Certification Case#: 5005; Decedent: JOHN, GRISHAM

SELECT A MEDICAL CERTIFIER FROM XYZ GREATER RICHMOND HOSPITAL

☒ ASSIGN CASE TO MEDICAL DOCTOR'S POOL

☐ ASSIGN CASE TO INDIVIDUAL MEDICAL DOCTOR


[EDIRBT](#)

- Make the appropriate/desired selection. Click on the SUBMIT Button to continue requesting medical certification.

5. ASSIGNING A CASE TO A FUNERAL HOME

- In order to associate a funeral home with a case, begin by clicking on the ASSIGN TO FUNERAL HOME link in the left navigation bar. This link will only be activated once you have selected the case from your ACTIVE CASES list.
- The ASSIGN TO FUNERAL HOME link is grouped under the Medical Certification link in the left navigation bar.

Death Registration Menu	Case Summary
▼ Demographics	
▲ Medical Certification	
● Place of Death	Case Id:
● Determination of Death	Demographics Stat
● Cause of Death	Medical Certification
● Other Factors	Current Status:
● Certification	SSN Verification Sta
● Assign to Funeral Home	Date Created:



- Perform a simple search for the desired funeral home on the screen resulting from the prior step.

Death Registration Menu	Search Funeral Home	Case#: 454; Decedent: JOHN, GRISH
▼ Demographics	Search for the Funeral Homes	
▲ Medical Certification	Funeral Home Name <input type="text"/> City <input type="text"/> Zip <input type="text"/> State <input type="text" value="Virginia"/>	
● Place of Death	<input type="button" value="Search Funeral Homes"/>	
● Determination of Death		
● Cause of Death		
● Other Factors		
● Certification		
● Assign to Funeral Home		
● Case Validation		
● Case Summary		
● Case Comments		
● Case Events		
● Preview Certificate		
● Create/Print Forms		
● EDRS Menu		
● Logout		

[EDQAFH](#)

- Select the desired funeral home by clicking on the SELECT button corresponding to the funeral home in the list.

List of Funeral Homes					
Funeral Home	Address	City	Zip	State	
A.L. BENNETT & SON FUNERAL HOME, INC.	200 BUTTERNUT DRIVE	FREDERICKSBURG		VA	Select
ABRAHAM APPLEWHITE AND SON'S FUNERAL HOME	540 EAST CONSTANCE ROAD P. O. BOX 679	SUFFOLK	23434	VA	Select
ACCESS TRANSPORTATION CORPORATION	ACCESS TRANSPORTATION CORPORATION 5 GIBBS COURT	HAMPTON	23664	VA	Select
ADAMS-GREEN FUNERAL HOME, LLC	721 ELDEN STREET	HERNDON	20172	VA	Select
ADEN MUSLIM FUNERAL SERVICES	1242 EASY STREET	WOODBIDGE	22191	VA	Select
ADVENT FUNERAL AND CREMATION SERVICES	7211 LEE HIGHWAY	FALLS CHURCH	22046	VA	Select
ALFIRDAUS JINNAZA SERVICES, LLC	7903 HILL PARK, #8	LORTON	22079	VA	Select
ALL BLESSED SERVICES, LLC	1205 HOLLY STREET	FALMOUTH	22405	VA	Select
ALL NATIONS TRANSPORTATION AND REMOVAL	6676 CLARKES MEADOW DRIVE	BEALETON	22712	VA	Select

- Confirm this association on the next page by clicking on the ASSIGN FUNERAL HOME button

Demographics Certifier Assignment		Case#: 454; Decedent: JOHN, GRISHAM
<div> <div> Facility Name: ANGEL WINGS Address: 955 KINGSWAY ROAD RICHMOND VA23225 </div> <div> Name: Pending (Facility) Title: Phone: </div> </div> <p>Demographics yet to assign or pending.</p>		
<div> <div>Back to List</div> <div>Assign Funeral Home</div> </div>		

[EDIAFH](#)

Note:

- ♦ Selecting "Assign Funeral Home" will associate the above mentioned Funeral Home to this case.
- ♦ Selecting "Transfer to Funeral Home" will associate the above mentioned Funeral Home with this case and also transfer ownership of this case to the Funeral Home mentioned above.

♦ If you know about both the LME and the Funeral Home working on this case, it is better to associate both entities to the case before transferring the case to one of them. Once either of those entities have certified their portion of the Death Certificate, the case will be automatically be transferred to the other entity by the system. For example - Once the Funeral Home has certified the demographic information for the decedent, the case will automatically be transferred to the selected LME.

♦ Alternately, You may transfer the case either to an LME or to a Funeral Home. Once the receiving party has completed their portion of the death certificate, you will be required to transfer the case to the other party. In a case where you have transferred the case to an LME, you must coordinate the transfer of the case to the Funeral Home with the LME. Either a Medico Legal Investigator or an LME may transfer the case to a Funeral Home.

6. RELEASE DECEDENT

- This process ensures that the Death Certificate is not released to a funeral home prior to them having taken possession of the decedent's body.
- To begin, click on the RELEASE DECEDENT link in the left navigation bar.



- The Resulting screen would be a searchable list of cases where the death certificates are awaiting release to a funeral home.

Electronic Death Registration System

User: Staff Da_Group(DA_STAFF)
Facility: Xyz Greater Richmond Hospital

Death Registration Menu

- Create Case
- Active Cases
- Completed Cases
- Fetal Death Assignments
- Release Decedent
- Reports/Extracts
- User Preferences
- Message Center(2)
- EDRS Menu
- VVESTS Menu
- Logout

Decedent Search Results - Release Decedent

Case ID: Creation Date: To (mm/dd/yyyy)

Decedent

First Name: Middle Name:
Last Name: Maiden Name:
Date of Birth: (mm/dd/yyyy) Date of Death: (mm/dd/yyyy)
Social Security Number: - - County of Death:

Cases Ready for Releasing Decedent

Case ID	Case Type	Decedent Name [First,Middle,Last]	Gender	DOB	DOD	Current Owner	Status
4445	Green Border	POOL1, POOL1	MALE		01/01/2014	MED_DOC2 (XYZ GREATER RICHMOND HOSPITAL)	Medical Information Certified
4444	Green Border	DOC2, DOC2, DOC2	MALE		05/01/2013	MED_DOC1 (XYZ GREATER RICHMOND HOSPITAL)	Medical Information Certified
4245	Green Border	HANDY, DANDY	MALE	02/28/1965	01/25/2014	MED_DOC1 (XYZ GREATER RICHMOND HOSPITAL)	Medical Information Certified

Your search returned 3 records. Records 1 through 3 are displayed.

- Select your case by clicking on the CASE ID hyperlink.

Cases Ready for Releasing Decedent							
Case ID	Case Type	Decedent Name [First,Middle,Last]	Gender	DOB	DOD	Current Owner	Status
454		JOHN, GRISHAM	MALE	03/19/1981	05/05/2014	CENT_ME_1 (OCME - CENTRAL DISTRICT)	Medical Information Certified

Your search returned 1 records. Records 1 through 1 are displayed.

- Click on the TRANSFER CASE button to transfer the case to the Funeral home
- The name and address of the Funeral Home will be pre-populated based on the Assign to Funeral Home step performed earlier. You may select a different facility by clicking on the blue “L”.

Release Decedent

Case ID:	454
Decedent Name:	JOHN, GRISHAM
Date of Birth:	03/19/1981
Place of Birth:	Virginia
Date of Death:	05/05/2014

Facility:	ACCESS TRANSPORTATION CORPORATION L
Address Details:	ACCESS TRANSPORTATION CORPORATION 5 GIBBS COURT HAMPTON VA 23664

[Transfer Case](#)
[Drop To Paper](#)
[Back to List](#)


- A confirmation message will indicate successful transfer to the funeral home.

7. DROP TO PAPER

Once a case has been certified by the physician and needs to be transferred to the funeral home, you may realize that the funeral home is not a participant in the EDRS. The DROP to PAPER function will enable you to print a copy of the electronically created Death Certificate and provide the certificate to the funeral home.

- To begin, navigate to the desired record's CASE SUMMARY by clicking on the link in the left navigation bar.

Death Registration Menu	Case Summary
▼ Demographics	
▼ Medical Certification	Drop to Paper
● Place of Death	
● Determination of Death	Case Type
● Cause of Death	Is this Case
● Other Factors	
● Certification	Case Id:
● Assign to FH/VSAP	Demograph
	Medical Cer
● Case Validation	Current Sta
● Case Summary	Death Certifica
● Case Comments	Date Create
● Case Events	



- STEP 2-** Click on the DROP to PAPER link at the top of the page to print the Death Certificate. The EDRS will guide you through two more pages where you would be required to SUBMIT.

Electronic Death Registration System		User: Staff Da_Group(DA_STAFF) Facility: XYZ Greater Richmond Hospital	
Death Registration Menu	Case Summary	Case#: 4445; Decedent: POOL1, POOL1	
▼ Demographics	Drop to Paper	Back to List Case History	
● Decedent Information			
● Decedent Residence			
● Decedent Personal Data			
● Decedent Family			
● Informant Data			
● Place of Death			
● Disposition			
● eSignature			
● Request MC			
▼ Medical Certification			
● Case Validation			
● Case Summary			
● Case Comments			
● Preview Certificate			
● Create/Print Forms			
● EDRS Menu			
● Logout			

Case Type			
Case Type	Green Border	Created By	XYZ GREATER RICHMOND HOSPITAL
Is this Case for Other District?	Not Applicable	Is decedent body viewed at District?	Not Applicable

Status Details			
Case Id:	4445	Signed By:	
Demographics Status:	Pending	Certified By:	DOCTOR2, MEDICAL
Medical Certification Status:	Certified (Completed)	Owned By:	XYZ GREATER RICHMOND HOSPITAL
Current Status:	Medical Information Certified	Funeral Home:	
SSN Verification Status:	Unknown	Date Last Modified:	03/03/2014 02:44:07 PM
Date Created:	03/03/2014 01:26:30 PM		

Demographics			
Decedent			
Name:	POOL1, POOL1	Gender:	MALE
Age:		Place of Birth:	
Date of Death:	01/01/2014 00:00:00 AM	Date of Birth:	
Decedent ever in Armed Forces ?:		Social Security Number:	
Residence Address			
Address:			
Decedent Personal Data			
